								Application or Decket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 P P - 00 water									069				
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							Mallen Ype [-	OR	OTHER SMALL I		
TOTAL CLAIMS			38					RATE	FEE		RATE	FEE	
FO	4		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	Basic Fee	710.00	
70	TAL CHARGEA	BLE GLAIMS	9 8 min	28 minus 20= *)		8		X\$ 9=		OR	X\$18=	324-00	
IND	EPENDENT CL	AIMS	Y mir	nus 3 =	1			X40=		OR	X80=	80-00	
MUI	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+135=		OR	+270=	Du	
* [f	* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	1114	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS FEMAINING AFTER AMENDMENT		NUM PREVI	lest Iber Ously For	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		=		X40=	0	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
						,	TOTAL ADDIT. FEE		OR	R ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								_					
MENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDI	Independent	•	Minus	***		=		X40=		OR	X80=		
F	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		7	+135=		OR	+270=		
							ı	TOTAL	-	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								AUDII, FEE					
DMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	•	Minus	**	10014	=		X\$ 9=		OR	X\$18=		

		(Column 1)		(Columniz)	(Column 3)				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
DI M	Total		Minus	**	=				
A	Independent	*	Minus	***	=				
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE
₹	Total	•	Minus	**	=	X\$ 9=		OR	X\$18=	
M	Independent	•	Minus	***	=	X40=		OR	X80=	
_	FIRST PRESE	ENTATION OF M	ULTIPLE DI	EPENDENT CLAIM	+135=		OR	+270=		
* If the Intry in column : less than the entry in column 2, write "0" in column 3. ** If the "Highest Cambe is eviously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Cambe is eviously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number is eviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										
	The Highest Ma	moer - Oviously Pa	tio For (10tal	or independently is or	e regress runiuse:		appropriate of			